

**Provide community crisis intervention/integration into community mental health services.**

**Agency/Program #:** 69010-33-I1  
**Division:** Addictive & Mental Disorders  
**Program:** Community Mental Health Svcs

<b>Agency Name:</b>	Department of Public Health and Human Services	
<b>Agency Contact:</b>	Joyce DeCunzo	444-3969
<b>LFC Contact:</b>	Senator Cobb; Senator Williams	
<b>LFD Liaison:</b>	Lois Steinbeck	444-5391
<b>OBPP Liaison:</b>	Pat Sullivan	444-1207

**Program or Project Description:**

The Addictive and Mental Disorders Division (AMDD) provides publicly funded mental health services for adults, chemical dependency services, and administers two state mental health institutions. Community mental health services include crisis intervention services.

Appropriation, Expenditure and Source					
Fund Name:	2008		2009		Approp & Expenditure numbers are as of October 31, 2007
	Approp.	Expended	Approp.	Expended	
General Fund					
State Special					
Federal Funds					
Total:	\$0	\$0	\$0	\$0	

**Goal(s):**

Provide community crisis intervention and integration into community services as an alternative to inpatient or state hospital treatment.

**Performance Measures :**

- 1) Development of 72-hour presumptive eligibility and payment for crisis stabilization services in community hospitals and community settings.
- 2) Establishment of baseline data in the following areas for second half of FY 08:
  - a. Number of individuals receiving crisis stabilization services with presumptive eligibility
  - b. Average cost of presumptive eligibility episode
  - c. Number of individuals who require additional crisis stabilization services within 30, 90, 180 days

2009 Biennium Significant Milestones:		Completion Dates	
		Target	Actual
1			
2			
3			
4			
5			

**Performance Report:****LFD Narrative:****EXECUTIVE CHANGES:**

1. Changes to Goals/Initiatives No
2. Changes to Performance Measures No

**LFD ASSESSMENT:**

1. Goal is measurable within the biennium Yes
2. Progress toward goal On-track - AMDD has taken a measured approach to developing 72-hour crisis services and the initiative is progressing. However, services will not be on-line until later in FY 2008 or in early 2009.

**APPROPRIATION ISSUES**

1. Appropriation/Expenditures Provided No - The executive did not provide appropriation or expenditure data. The LFC could choose to use the amount appropriated for this initiative - \$2,032,770 as the appropriation.
2. Other Appropriation Issues - It appears there will be a significant proportion of the FY 08 appropriation for 72-hour crisis services reverted. The LFC may wish to ask for estimated expenditures for 72-hour crisis services.

**OPTIONS REGARDING GOAL/INITIATIVE AND PERFORMANCE MEASURES**

1. On track – As noted previously, the project is progressing. The executive fleshed out milestones for the 72-hour crisis services. The milestones listed are practically complete, with one potential clarification as to whether telepsychiatry services will come on line at the same time as the crisis services.
2. Request additional information from the program – The legislature may wish to ask for estimated expenditures related to the 72 hour crisis services.



Version	Date	Author
BO - 1	12/05/07	Steinbeck

Change Description
LFD narrative added



GOVERNOR'S OFFICE OF  
BUDGET AND PROGRAM PLANNING

## Goals/Objectives

**Agency Contact:** Joyce DeCunzo **Phone Number:** 444-3969  
**Agency Name:** Department of Public Health and Human Services  
**Division:** Addictive & Mental Disorders  
**Program (identify and briefly describe):** Community Mental Health Services

This initiative will provide payment for up to 72 hours of crisis stabilization services in either hospital or community settings. It includes the provision of around-the-clock televideo psychiatric support.

### **List a single goal and brief description:**

Provide community crisis intervention and integration into community services as an alternative to inpatient or state hospital treatment

### **Describe the performance measures related to this goal:**

- 1.) Development of 72-hour presumptive eligibility and payment for crisis stabilization services in community hospitals and community settings.
- 2.) Establishment of baseline data in the following areas for second half of FY 08:
  - a. Number of individuals receiving crisis stabilization services with presumptive eligibility
  - b. Average cost of presumptive eligibility episode
  - c. Number of individuals who require additional crisis stabilization services within 30, 90, 180 days.

### **List significant milestones and target dates to be completed in the 2009 Biennium:**

Develop presumptive eligibility criteria. 12/31/2007  
Hire Benefits management staff. 12/31/2007  
Develop prior authorization and payment process for crisis stabilization services. 12/31/2007  
Develop Telemedicine/Telepsychiatry payment process. 3/31/2008  
Add 2700 community based crisis bed days. 6/30/2009

### **Describe the current status of the measurements related to the goal:**

November, 2007. RFI issued for telepsychiatry services.  
Contracted with ACS for assistance to develop eligibility criteria and program design.  
Developed CSR for changes to MMIS to accommodate Crisis Services